

CLAIMS ONLY						Application Number 10809460	Filing Date		
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
1	I					51			
2		I				52			
3		I				53			
4						54			
5		I				55			
6		I				56			
7		I				57			
8		I				58			
9		I				59			
10		I				60			
11		I				61			
12	I					62			
13		I				63			
14	I					64			
15		I				65			
16		I				66			
17		I				67			
18						68			
19						69			
20						70			
21						71			
22						72			
23						73			
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25						75			
26						76			
27						77			
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32						82			
33						83			
34						84			
35						85			
36						86			
37						87			
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39						89			
40						90			
41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
Total Indep	3					Total Indep			
Total Depend	14	←	←	←		Total Depend	←	←	←
Total Claims	17					Total Claims			